FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB API	PROVAL '
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Sale of Series A Preferred Stock (and the Common Stock issuable upon conversion thereof) Filing Under (Check box(es) that apply):
Rule 504 ☐ Rule 505 Rule 506 ☐ Section 4(6) ☐ ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Clickable, Inc. Address of Executive Offices Telephone Number (Including Area (Number and Street, City, State, Zip Code) (646) 775-4169 36 East 20th Street, 3rd Floor, New York, NY 10003 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Are (if different from Executive Offices) Same as above. Brief Description of Business Dynamic online advertising management Type of Business Organization Corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed Year Month Actual or Estimated Date of Incorporation or Organization: 1 2 0 6 ☐ Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: CN for Canada; FN for other foreign jurisdiction) D. E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

			·		
		A. BASIC IDENT	FICATION DATA		
 Each beneficial owner 	issuer, if the issuer her having the power to er and director of con	has been organized within the p o vote or dispose, or direct the porate issuers and of corporate	vote or disposition of, 10% or r		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, Kidder, David S.	if individual)		_		
Business or Residence Addre	ess (Number and S	treet, City, State, Zip Code)	1		
c/o Clickable, Inc., 36 East	20th Street, 3rd I	Floor, New York, NY 1000	3		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, Gandhi, Munish	if individual)				
Business or Residence Addre	ess (Number and S	Street, City, State, Zip Code)	1		
c/o Clickable, Inc., 36 East	20th Street, 3rd I	Floor, New York, NY 1000	3		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, Wenger, Albert	if individual)				
Business or Residence Addre	ess (Number and S	Street, City, State, Zip Code)	1		
c/o Eckford Capital, LLC,	434 Mamaroneck	Ave, Suite 105, Mamaron	eck, NY 10543		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)	·			
Monster, Robert					
Business or Residence Addre	ess (Number and S	street, City, State, Zip Code)			
c/o Monster Venture Partn	ers, LLC, 3832 2	34th Ave. SE, Sammamish	, WA 98075		
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Union Square Ventures 20	*****		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre		•	1		
915 Broadway, Suite 1408,	New York, New		••••		
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	•				
Pequot Private Equity Fun					
Business or Residence Addre	ess (Number and S	treet, City, State, Zip Code)	l		
500 Nyala Farm Road, We	stport, CT 06880				

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Beneficial Owner

☐ Executive Officer

☐ Director

General and/or
Managing Partner

				B. 17	NFORMAT	TION ABO	UT OFFE	RING				
****									,		Yes	No
l. Has t	he issuer solo	l, or does the	e issuer inte				stors in this Column 2, i	_				\boxtimes
						,	*	ŭ				
2. What	is the minim	um investm	ent that wil	I be accept	ed from any	y individual	?				Yes	n/a No
3. Does	the offering	permit ioint	ownership	of a single	unit?							NO M
	the informa										_	_
comr offer with	nission or si ing. If a pers a state or sta ons of such a l	milar remu on to be list tes, list the	neration fo ed is an ass name of the	r solicitati sociated pe e broker or	on of purc rson or age dealer. If	hasers in on nt of a brok more than	connection er or dealer five (5) per	with sales registered rsons to be	of securition with the SE listed are a	es in the EC and/or		
Full Name	e (Last name	first, if indiv	vidual) I	1/a								
Business o	or Residence	Address (Nu	umber and S	Street, City	, State, Zip	Code) n	/a	.				
Name of A	Associated Br	oker or Dea	ler n/a									
	Which Person											
(Check "A [AL]	All States" or [AK]	check indivi [AZ]	iduals State [AR]	s). [CA]	All Stat [CO]	tes [CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
												[MO]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	e (Last name	first, if indiv	/idual n/	a								
Business of	or Residence	Address (Ni	ımber and S	Street, City	, State, Zip	Code) n	/a				,	· · · · · · · · · · · · · · · · · · ·
Name of A	Associated Br	oker or Dea	ler n/a				-	,				
	Which Person All States" or							•				•
(Check A	(AK)	[AZ]	[AR]	(CA)	All Stat	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
run Name	e (Last name		nuuai) II	/a								
	or Residence	Address (Nu	umber and	Street, City	, State, Zip	Code) n	/a					
Business of		akar ar Daa	ler n/a	. ,								
	Associated Br	oker of Dea					·	·				
Name of A	Which Person	Listed Has										
Name of A		Listed Has			Solicit Pur All Stat [CO]		[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
Name of A	Which Person All States" or	Listed Has	iduals State	s)	All Stat	tes	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
Name of A States in V (Check "A [AL]	Which Person All States" or [AK]	Listed Has check indivi [AZ]	iduals State [AR]	s) [CA]	All Stat [CO]	tes [CT]						

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Agavasata	A	nount Alread-
	Type of Security	Aggregate Offering Price	All	nount Already Sold
	Debt	\$ 0.00	\$_	0.00
	Equity	\$ 3,000,000.00	\$	3,000,000.00
	☐ Common ☑ Preferred			
	Convertible Securities (including warrants)	\$ 0.00	\$	0.00
	·	\$ 0.00		0.00
	·	\$ 0.00	-	0.00
		\$ 3,000,000.00	-	3.000.000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		. ~ -	
٤.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Aggregate ollar Amount of Purchase
	Accredited Investors	16	\$	3,000,000.00
	Non-accredited Investors	0	· \$	0.00
	Total (for filings under Rule 504 only)	0	\$	0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		D	ollar Amount
	Type of Offering	Security		Sold
	Rule 505	n/a	<u>\$</u>	0.00
	Regulation A	n/a	<u>\$_</u>	0.00
	Rule 504	n/a	<u>\$</u>	0.00
	Totai		\$ _	0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish ar estimate and check the box to the left of the estimate.	,		
	Transfer Agent's Fees		\$_	0.00
	Printing and Engraving Costs		\$	0.00
	Legal Fees	\boxtimes	\$	50,000.00
	Accounting Fees		\$	0.00
	Engineering Fees		\$	0.00
	Sales Commissions (specify finders' fees separately)		\$	0.00
	Other Expenses (identify)		\$	0.00
	Total	oxdiv	\$	50,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	rKU	CEEDS		
	b. Enter the difference between the aggregate offering price-given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	S		\$_	2,950,000.00
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	(
			Payments to Officers, Directors, & Affiliates	:	Payments to Others
	Salaries and fees		\$0.00		\$0.0
	Purchase of real estate		\$0.00		\$0.0
	Purchase, rental or leasing and installation of machinery and equipment		\$0.00		\$0.0
	Construction or leasing of plant buildings and facilities		\$		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$0.00		\$0.0
	Repayment of indebtedness		\$ 0.00		\$0.0
	Working capital		\$0.00	\boxtimes	\$ 2,950,000.0
	Other (specify):		\$0.00		\$0.0
Col	umn Totals		\$8	\boxtimes	\$ 2,950,000.0

Total Payments Listed (column totals added)

2,950,000.00

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Clickable, Inc.		06.4.07
Name of Signer (Print or Type)	Title or Signer (Print or Type)	
David S. Kidder	Chief Executive Officer	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18. U.S.C. 1001.)

